



**GRAND RAPIDS TOWNSHIP**

**POVERTY EXEMPTION APPLICATION AND CHECKLIST**

I, \_\_\_\_\_, being the owner and resident of the property listed below, apply for tax relief for tax year \_\_\_\_\_ under MCL 211.7u of the Michigan General Property Tax Act (The real and personal property of persons who, in the judgment of the assessor and Board of Review, by reason of poverty are unable to contribute toward the public charges is eligible for exemption in whole or in part from taxation under this act.).

Name of Applicant: \_\_\_\_\_ Age of Applicant: \_\_\_\_\_

Name of Spouse: \_\_\_\_\_ Age of Spouse: \_\_\_\_\_

Parcel Number: \_\_\_\_\_ Principal Residence Exemption % \_\_\_\_\_

Property Address: \_\_\_\_\_

Home Phone: \_\_\_\_\_ Cell Phone: \_\_\_\_\_ Work Phone: \_\_\_\_\_

List all dependants below:

Name	Relationship to Applicant	Age

**INCOME**

State Law now requires that claimants under MCL 211.7u submit copies of “**Federal and State Income Tax returns for all persons residing in the Homestead including any property tax credit returns, filed in the immediately preceding year or in the current year.**” Submit these documents with this application.

Name of employer: \_\_\_\_\_ Length of time employed \_\_\_\_\_

Address: \_\_\_\_\_

Phone number: \_\_\_\_\_ Gross monthly income: \_\_\_\_\_

List all income from spouse and dependents below:

Name	Source of Income	Monthly or Annual Amount

List all other sources of income from Social Security, rents, pensions, unemployment compensation, disability, government pensions, retirement account, workers' compensation, dividends, claims, and judgments from lawsuits, alimony, child support and any other source, including regular, recurrent payments from non-household members. Periodic payments from non-household members do not include sporadic payments or gifts.

Source	Monthly or Annual Amount

**ASSETS**

**REAL ESTATE:** Is home paid for? \_\_\_\_\_ Unpaid balance \_\_\_\_\_

Name of mortgage Company \_\_\_\_\_ Monthly payment \_\_\_\_\_

How long have you lived in this residence? \_\_\_\_\_

Do you own or are you purchasing other property? \_\_\_\_\_

If so, list below:

Property Address	Name of Owner	Assessed Value	Amount and Date of Last Taxes Paid

Amount of income earned from above properties: \_\_\_\_\_

**SAVINGS AND INVESTMENTS:** List all savings owned by you or you spouse; including savings accounts, postal savings, credit union shares, certificates of deposit, cash, stocks, bonds, or similar investments.

Name of Financial Institution or Investments	Amount on Deposit	Current Interest Rate	Name on Account	Value of Investment

**MOTOR VEHICLES IN HOUSEHOLD:** List all titled and non-titled motor vehicles as well as recreation vehicles.

Make	Year	Value	Monthly Payment	Balance Owed

**OTHER ASSETS:** List all other assets and their values that are owned or controlled by you.

Type of Asset	Value	Income Derived from Asset	Owner

**LIABILITIES AND EXPENSES**

**MONTHLY EXPENSES:**

Electricity \_\_\_\_\_ Gas \_\_\_\_\_ Telephone \_\_\_\_\_

Other (specify)

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